

AUTHENTICATION OF SIGNATURE  
NUMBER 5119/2018

אישור אימות חתימה 5119/2018

AUTHENTICATION OF SIGNATURE OF  
PERSON SIGNING ON BEHALF OF A BODY  
CORPORATE OR IN THE NAME OF  
ANOTHER PERSON

אימות חתימתו של אדם בשם תאגיד

I, the undersigned, Mario Zelechowski, notary at 42 Weizman St., Kfar Saba, Israel, hereby certify that on 03.01.18 there appeared before me at my office, **Michal Nir - Simchen**, whose identity was proved to me by Israeli ID No. 058748260 issued by Ministry of The Interior of Israel and **Karina Shlemovich**, whose identity was proved to me by Israeli ID No. 308603737 issued by Ministry of The Interior of Israel.

אני הח"מ, מריו סלצ'ובסקי, נוטריון בכפר-סבא, ישראל, רח' ויצמן 42 בכפר סבא, מצהיר בזה כי ביום 03.01.18 ניצבו לפני גב' **מיכל ניר - שמחן** שזהותה הוכחה לי על ידי תעודת זהות ישראלית מס' 058748260 שניתנה מאת משרד הפנים במדינת ישראל וגב' **קרינה שלמוביץ** שזהותה הוכחה לי על ידי תעודת זהות ישראלית מספר 308603737 שניתנה מאת משרד הפנים במדינת ישראל.

and signed of their own free will the attached document marked "A", on behalf of **BANK HAPOALIM B.M.** and I certify that, with a view to establishing the right of the above to sign on behalf of **BANK HAPOALIM B.M.** there has been produced to me a certification.

וחתמו בשם **בנק הפועלים בע"מ** מרצונם החופשי על המסמך המצורף והמסומן באות "א".  
אני מאשר כי להוכחת רשותם הנ"ל לחתום בשם **בנק הפועלים בע"מ** הוצג בפני אישור.

In witness whereof I hereby authenticate the signature of **Michal Nir - Simchen and Karina Shlemovich**, by my own signature and notary's seal today 03.01.18.

לראיה הנני מאשר את חתימתם של גב' **מיכל ניר - שמחן** וגב' **קרינה שלמוביץ** בחתימת ידי ובחותמי.  
היום 03.01.18.

Fees paid: 294 NIS + VAT

שכ"ט נוטריון בסך 294 ₪ + מע"מ.



חתימת הנוטריון  
Signature

חותם הנוטריון  
Seal

Mario Zelechowski  
Notary  
42 Weizman Street  
Kfar Saba - Israel  
Tel: 972-9-7400667  
Fax: 972-9-7460294

מריו סלצ'ובסקי  
נוטריון  
רח' ויצמן 42  
כפר סבא - ישראל  
טל: 09-7400667  
פקס: 09-7460294



# APOSTILLE

(Convention de la Haye du 5 Octobre 1961)

## 1. STATE OF ISRAEL

## 1. מדינת ישראל

This public document

מסמך ציבורי זה

2. Has been signed by

2. נחתם בידי

Advocate Mario Zelechowski מריו סלצ'ובסקי עו"ד

3. Acting in capacity of Notary

3. המכהן בתור נוטריון.

4. Bears the seal/stamp of

4. נושא את החותם/החותמת

the above Notary

של הנוטריון הנ"ל

**Certified**

**אושר**

5. At the Magistrates Court of Kfar Sava

5. בבית משפט השלום בכפר סבא

6. Date \_\_\_\_\_

6. ביום \_\_\_\_\_

7. By an official appointed by

04. 01. 2018

7. על ידי מי שמונה בידי שר

Minister of Justice under the

המשפטים לפי חוק הנוטריונים,

Notaries Law, 1976.

התשל"ו - 1976

8. Serial number 347057

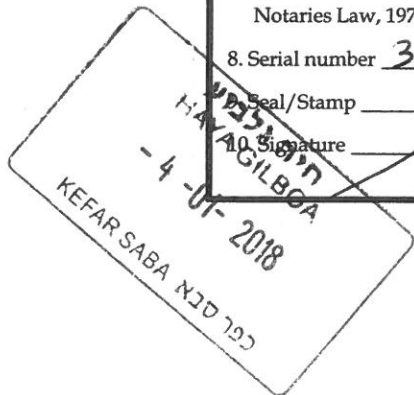
8. מס' סידורי \_\_\_\_\_

9. Seal/Stamp \_\_\_\_\_

9. החותם / החותמת \_\_\_\_\_

10. Signature \_\_\_\_\_

10. חתימה \_\_\_\_\_



**EVIDENCE OF TRANSFER OF CLAIM**

**TO: THE DEBTOR AND THE BANKRUPTCY COURT**

For value received, the adequacy and sufficiency of which are hereby acknowledged, **Bank Hapoalim B.M.** ("Transferor") unconditionally and irrevocably transferred to **CREDIT SUISSE (LUXEMBOURG) S.A. ZWEIGNIEDERLASSUNG ÖSTERREICH AG** ("Transferee") all of its right, title, interest, claims and causes of action in and to or arising under or in connection with the portion of its claim **Number. 55854** relating to the securities with International Securities Identification Numbers listed on Schedule I hereto against Lehman Brothers Holdings, Inc. (the "Debtor"), Chapter 11 Case No.: 08-13555 (JMP) (Jointly Administered), United States Bankruptcy Court for the Southern District of New York (the "Bankruptcy Court").

Transferor hereby waives any objection to the transfer of the claim to Transferee on the books and records of the Debtor and the Bankruptcy Court and hereby waives to the fullest extent permitted by law any notice or right to a hearing as may be imposed by Rule 3001 of the Federal Rules of Bankruptcy Procedure, the Bankruptcy Code, applicable local bankruptcy rules or applicable law. Transferor acknowledges and understands, and hereby stipulates, that an order of the Bankruptcy Court may be entered without further notice to Transferor regarding the transfer of the foregoing claim and recognizing the Transferee as the sole owner and holder of the claim. Transferor further directs the Debtor, the Bankruptcy Court and all other interested parties that all further notices relating to the claim, and all payments or distributions of money or property in respect of claim, shall be delivered or made to the Transferee.

IN WITNESS WHEREOF, this EVIDENCE OF TRANSFER OF CLAIM IS EXECUTED ON 03/01/, 2018

**Bank Hapoalim B.M.**

By: M Nir  
Name: Michal Nir - Simchen  
Title: Senior Vice President

By: Karina  
Name: Karina Shlemovich  
Title: Vice President



**SCHEDULE I**

**Lehman Programs Securities Related to Transferred Portion of Claim:**

ISIN	Court Claim #	Date Claim Filed	Issuer	Number of Units Currency
XS0346461634	55854	OCTOBER 29.2009	LEHMAN BROTHERS TSRY CO B.V	N.V 400,000 IN USD



"A" "A"  
MARIO ZELECHOWSKI  
NOTARY

Form 210A (10/06)

# United States Bankruptcy Court

Southern District Of New York

In re Lehman Brothers Holdings Inc., et al., Debtors,

Case No. 08-13555 (JMP)

## TRANSFER OF CLAIM OTHER THAN FOR SECURITY

A CLAIM HAS BEEN FILED IN THIS CASE or deemed filed under 11 U.S.C. § 1111(a). Transferee hereby gives evidence, attached hereto, and notice pursuant to Rule 3001(e)(2), Fed. R. Bankr. P., of the transfer, other than for security, of the claim referenced in this evidence and notice.

Credit Suisse Lux S.A. Zweigniederlassung Österreich

Name of Transferee

Name and Address where notices  
to transferee should be sent:

Stephanie R. Sweeney  
Klestadt Winters Jureller  
Southard & Stevens, LLP  
570 Seventh Avenue, 17th Floor  
New York, New York 10018

Phone: (212) 972-3000 Direct: (646) 998-6047

Last Four Digits of Acct #: \_\_\_\_\_

Name and Address where transferee  
payments should be sent (if different  
from above):

Phone: \_\_\_\_\_

Last Four Digits of Acct #: \_\_\_\_\_

Bank Hapoalim B.M.

Name of Transferor

Court Claim # (if known): 55854

Date Claim Filed: October 29, 2009

Amount of Claim: USD 400,000.00

Portion of Claim Transferred (see  
Schedule I): \_\_\_\_\_

Phone: +972 -3-6014189 (fax)

Last Four Digits of Acct. #: \_\_\_\_\_

I declare under penalty of perjury that the information provided in this notice is true and correct to  
the best of my knowledge and belief.

By: 

Philip J. Sweeney  
Transferee/Transferee's Agent

Date: Luxembourg, January 15, 2018

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 & 3571.